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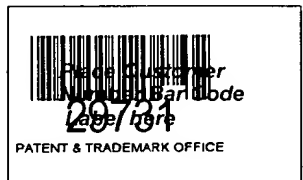
CHANGE OF CORRESPONDENCE ADDRESS Application

Address to:
Assistant Commissioner for Patents
Washington, D.C. 20231

Application Number	09/871383
Filing Date	05/31/2001
First Named Inventor	Edlin Solomon
Art Unit	
Examiner Name	
Attorney Docket Number	

Please change the Correspondence Address for the above-identified application to:

☐ Customer Number 000029731
Type Customer Number here



OR

<input type="checkbox"/> Firm or Individual Name	Edlin Solomon				
Address					
Address	St. Wolfson 52/10				
City	Rishon Le Zion	State		ZIP	75203
Country	Israel				
Telephone	067-495-464	Fax			

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

- ☒ Applicant/Inventor.
- ☐ Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☐ Attorney or Agent of record.
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or Printed Name	Edlin Solomon
Signature	
Date	3.10.2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.